

SRF - DISBURSEMENT REQUEST INFORMATION

1. Community: CITY OF WEST LAFAYETTE 1a. SRF Loan Number: CS 18240001
2. Mailing Address: 609 W. Navajo Street 2a. Request No.: ONE HUNDRED SIXTEEN
West Lafayette, IN 47906
3. Contact Person: Judith C. Rhodes 3a. Contact Phone No.: (765) 775-5150
4. Community's Authorized Representative: MAYOR JOHN R. DENNIS OR CLERK-TREASURER JUDITH RHODES
5. Authorized Representative's Phone No.: (765) 775-5100
6. Description of work for which claim is being made (service, fees, type of, etc.):
Western Sanitary Sewer Interceptor-Design Engineering Services Division IV

<u>7. Contractor</u>	<u>7a. Address</u>	<u>Amount Requested</u>
GREELEY AND HANSEN	LOCKBOX 619776 P.O. BOX 6197 CHICAGO, IL 60680-6197	\$ <u>3,045.00</u>
9. Original Loan Amount:		\$ <u>12,380,000.00</u>
10. Total Amount of Previous Disbursements		\$ <u>9,985,008.00</u>
11. Amount of this Request.....		\$ <u>3,045.00</u> <small>(Amount to Contractor plus retainage)</small>
12. Balance Available after this Disbursement.....		\$ <u>2,391,947.00</u>
13. Is a portion of the claim underlying this Request subject to retainage under I.C.36-1-12-14 or similar law? YES _____ NO _____ X _____		
14. If yes, the retainage amount is		\$ <u>0.00</u>
<small>(This amount will be sent to the retainage account set forth below and the remainder will be sent directly to the contractor identified above.)</small>		

Name of Bank: _____

Retainage Account Number: _____ Routing Number: _____

15. Has the Qualified Entity paid the request and is now seeking reimbursement? YES _____ NO _____ X _____

16. Is any part of this claim a result of a change order? YES _____ NO _____ X _____

17. Is this the final payment to the contractor? YES _____ NO _____ X _____

The undersigned hereby certifies that this Request is true and correct, that the claim underlying this Request is legally due (and is payable from SRF) in accordance with the Community's Financial Assistance Agreement with the State.

18. DATE: NOVEMBER 8, 2010

18a. _____

AUTHORIZED REPRESENTATIVE SIGNATURE

Mayor John R. Dennis

Judith C. Rhodes, Clerk-Treasurer



GREELEY AND HANSEN

100 S. Wacker Drive, Suite 1400
Chicago, Illinois 60606
p 312 558 9000
f 312 558 1986
www.greeley-hansen.com

October 21, 2010

Mr. David Henderson
Utility Director
City of West Lafayette
500 South River Road
West Lafayette, IN 47906

Subject: Western Sanitary Sewer Interceptor Division V Design
Invoice No. 326352

Dear David:

The enclosed invoice is for design services in connection with the Western Sanitary Sewer Interceptor Division V project. Invoice No. 326352 provides services from September 18, 2010 through October 15, 2010.

Please call me if you have any questions.

Thank you.

Very truly yours,

Greeley and Hansen


Joseph M. Teusch
JMT/img 



INVOICE

For customer service, call 312 578 2375.



GREELEY AND HANSEN

P.O. Box 6197
Chicago, Illinois 60680-6197
p 312 558 9000
www.greeley-hansen.com

Invoice Number: INV-0000326352

Invoice Date: 10/21/10

Description: AUTHORIZATION FOR DESIGN ENGINEERING SERVICES FOR THE WESTERN SANITARY SEWER INTERCEPTOR IN ACCORDANCE WITH THE AGREEMENT DATED JULY 27, 2004.

To:
MR. DAVID HENDERSON
CITY OF WEST LAFAYETTE
500 SOUTH RIVER ROAD
WEST LAFAYETTE, IN 47906

Remit To:
GREELEY AND HANSEN
LOCKBOX 619776
P.O. BOX 6197
CHICAGO, IL 60680-6197

Customer Number:	0791	Cost:	<u>Contract Value</u> 1,125,038.00
Project Number:	07914.01	Cumulative Amount Billed:	1,046,390.58
	WESTERN SANITARY		
Project Name:	SEWER		
Terms:	NET 30	Services	09/18/10
Due Date:	11/20/2010	Through:	10/15/10

	<u>Current Amount</u>	<u>Cumulative Amount</u>
Direct Labor with Multiplier (3.07)	3,045.47	940,685.93
Total Labor	3,045.47	940,685.93
Subconsultants	0.00	98,168.27
Travel	0.00	2,204.37
Printing	0.00	1,984.00
Miscellaneous	0.00	114.93
Total ODC's	0.00	102,471.57
Mark-up on Sub Consultant	0.00	3,233.08
	0.00	3,233.08
Invoice Total	<u>3,045.47</u>	<u>1,046,390.58</u>

Current Incurred Hours: 21.50



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Invoice Number:	INV-0000326352	Project Number:	07914.01	Invoice Date:	10/21/10
		Project Name:	WESTERN SANITARY SEWER		

Direct Labor Supporting Schedule

Group Description:

Total Labor

Labor Cat Descr.	Employee/ Vendor	Current Hours	Current Amount
CIVIL SANITARY ASSOCIATE	JOSEPH TEUSCH	21.50	992.01
Total Direct Labor		21.50	\$992.01